

TEST HOLE COMPLETION REPORT

Form No. R4 Revised on 12/7/98

FOR STATE USE ONLY					
Date filed	Date released				

INDIANA DEPARTMENT OF NATURAL RESOURCES

Division of Oil and Gas 402 W. Washington St., Rm. 293 Indianapolis, IN 46204 Phone (317) 232-4055 FAX (317) 232-1550

Internet: http://www.state.in.us/dnroil

PART I GENERAL INFORMATION											
Name of ope	of operator					Telephone r	number		Permit r	number	
Address of operator (Check here if this is a new address)											
City							State			Zip code	Э
							1				
PART II			INDI	VIDU	AL TES	ST HOLE LOC	ATION INFO	RMATIO	N		
Name of lea	se						Hole numbe	er		Elevatio	n (G.L.)
Section	Township	Range	1/4	1/4	1/4	Footage's:	ft. from ft. from		□NW, □ , □NE, □	SE line SW line	
County Important: Regardless of any request to withhold completion information under 312 IAC 22-2-16, you must submit locational information for all test holes.											
PART III			CO	IINITV	/ TEST	HOLE LOCAT	TON INFORM	IATION			
	Names	800	ction,			HOLE LOCAL	ION INFORM		200		
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						Ft. N	' 			=,	□NE, □SW
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__E, ___W, __NE, __SW

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PART IV INDIVIDUAL TEST HOLE COMPLETION INFORMATION							
Test hole type (Check one only)							
☐ Geologic investigation ☐ Engineering investigation ☐ Mineral investigation ☐ Fluid disposal investigation							
Date Completed	Tools			Total Depth			
Important: See 312 IAC 22-2-16 for							
information about withholding the	Rotary from	ft. to	ft	Drillers	ft.		
completion information in PARTS IV & V	Cable from	ft. to	ft.	Loggers	ft.		
Geophysical Logs	Complet	tion Interv	als	Well Treatments			
(Submit 3 copies of each)	From	ft. to	ft	Fractured	d with	gallons	
	From	ft. to	ft	Fractured	d with	gallons	
	From	ft. to	ft	Acidized	d with	gallons	
	From	ft. to	ft	Acidized	d with	gallons	
	From	ft. to	ft	Sho	t with	quarts	

PART V INDIVIDUAL TEST HOLE FORMATION INFORMATION							
The information in PART IV is not required but should be submitted if available for individual test holes							
	Intervals		Rock Description	I	ntervals		Rock Description
From	ft. to	ft		From	ft. to	ft	-
From	ft. to	ft		From	ft. to	ft	
From	ft. to	ft		From	ft. to	ft	
From	ft. to	ft		From	ft. to	ft	
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From	ft. to	ft		From	ft. to	ft	

PART VII	AFFIRMATION					
I affirm under penalty of perjury that the information provided in this report is true to the best of my knowledge and belief						
Signature of operator or authorized agent	Date signed					
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- Special Requirements
 1. Only those persons whose names appear in PARTS V or VI of the Organizational Report are authorized to sign this report.
- 2. This form must be submitted within 30 days following the completion of the last hole drilled under the permit.